

TOWN OF NEW WINDSOR

555 UNION AVENUE
NEW WINDSOR, NEW YORK 12553
Telephone: (914) 563-4615
Fax: (914) 563-4693

PLANNING BOARD APPLICATION

TYPE OF APPLICATION (check appropriate item):

Subdivision _____ Lot Line Change _____ Site Plan X Special Permit _____

Tax Map Designation: Sec. 9 Block 1 Lot 20.22 (20.21)

BUILDING DEPARTMENT REFERRAL NUMBER PA2003 - 1126

1. Name of Project Newburgh Masonic Fellowship

2. Owner of Record Mark S. Clegg c/o Richard Lease Phone 845-565-2800

Address: 10 Chapel Circle Court, Pine Bush, NY 12566
(Street Name & Number) (Post Office) (State) (Zip)

3. Name of Applicant Masonic Fellowship, Inc. Phone 845-561-5055

Address: P.O. Box 1664, Newburgh, NY 12550
(Street Name & Number) (Post Office) (State) (Zip)

4. Person Preparing Plan Anthony J. Coppola, Architect Phone 845-561-3559

Address: 375 Third Street, Newburgh, NY 12550
(Street Name & Number) (Post Office) (State) (Zip)

5. Attorney _____ Phone _____

Address _____
(Street Name & Number) (Post Office) (State) (Zip)

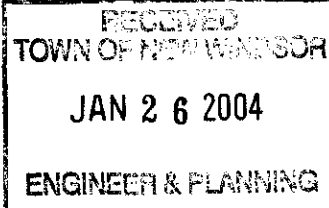
6. Person to be notified to appear at Planning Board meeting:
Anthony J. Coppola 845-561-3559 fax: 845-561-2051
(Name) (Phone)

7. Project Location: On the northwest side of NYS Route 32 1000 feet
(Direction) (Street) (No.)
southwest of FERN AV
(Direction) (Street)

8. Project Data: Acreage 18.47 Zone C School Dist. Newburgh

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(PLEASE DO NOT COPY 1 & 2 AS ONE PAGE TWO-SIDED)



04-02

9. Is this property within an Agricultural District containing a farm operation or within 500 feet of a farm operation located in an Agricultural District? Yes _____ No X

***This information can be verified in the Assessor's Office.**

***If you answer yes to question 9, please complete the attached AAgricultural Data Statement.**

10. Description of Project: (Use, Size, Number of Lots, etc.) _____
Proposed one story fraternal organization building for parcel A.

11. Has the Zoning Board of Appeals Granted any Variances for this property? yes _____ no X

12. Has a Special Permit previously been granted for this property? yes _____ no X

ACKNOWLEDGMENT:

IF THIS ACKNOWLEDGMENT IS COMPLETED BY ANYONE OTHER THAN THE PROPERTY OWNER, A SEPARATE NOTARIZED STATEMENT OR PROXY STATEMENT FROM THE OWNER MUST BE SUBMITTED, AT THE TIME OF APPLICATION, AUTHORIZING THIS APPLICATION.

STATE OF NEW YORK)

SS.:

COUNTY OF ORANGE)

THE UNDERSIGNED APPLICANT, BEING DULY SWORN, DEPOSES AND STATES THAT THE INFORMATION, STATEMENTS AND REPRESENTATIONS CONTAINED IN THIS APPLICATION AND SUPPORTING DOCUMENTS AND DRAWINGS ARE TRUE AND ACCURATE TO THE BEST OF HIS/HER KNOWLEDGE AND/OR BELIEF. THE APPLICANT FURTHER ACKNOWLEDGES RESPONSIBILITY TO THE TOWN FOR ALL FEES AND COSTS ASSOCIATED WITH THE REVIEW OF THIS APPLICATION.

SWORN BEFORE ME THIS:

9th DAY OF January 19 2004

[Signature]
APPLICANT'S SIGNATURE

[Signature]
NOTARY PUBLIC

KATHLEEN A. PARISI
Notary Public, State Of New York
Qualified in Orange County
Registration No. 01PA6073692
Commission Expires April 29, 2006

Brian R. Reynolds
Print Applicant's Name as Signed

TOWN USE ONLY:

04-02

DATE APPLICATION RECEIVED

APPLICATION NUMBER